



DOCKET NO. VTN629NP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Toshio Yamamoto, et al.

Serial No.: 10/681,974

Art Unit:

Filed : October 9, 2003

Examiner:

For : SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

March 4, 2004

(Date of Deposit)

Kathy L. Willan

(Name of applicant, assignee, or Registered Representative)

*Kathy L. Willan*  
(Signature)

March 4, 2004

(Date of Signature)

Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Toshio Yamamoto, et al. entitled SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS attorney Docket No. VTN629NP, to complete, pursuant to Rule 51, this application filed on October 10, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/VTN629NP/KAH in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/VTN629NP/KAH. This sheet is submitted in triplicate.

Respectfully submitted,

*Karen A. Harding*  
Karen A. Harding  
Reg. No. 33967  
Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
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Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
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**DECLARATION  
AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing ☐ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)  
OR

Attorney Docket Number VTN629NP

First Named Inventor Toshio Yamamoto

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS  
(Title of the Invention)**

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/09/2003 as United States Application Number or PCT International Application Number  and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



### DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer  
Number Bar Code  
Label Here

AND

☒ Practitioner(s) named below:

Name

Karen A. Harding

Registration Number

33,967

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Karen A. Harding at telephone number (904) 443-3074.

Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

Name: Karen A. Harding

Address: Johnson & Johnson Vision Care, Inc.

Address: P.O. Box 1222

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State: New Jersey

ZIP 08933

Country USA

Telephone: (904) 443-3074

Fax: (904) 443-3078



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any)) Toshio

Family Name

or Surname

Yamamoto

Inventor's  
Signature

Date

Feb 18, 2004

Residence: City Setagaya-Ku

State Tokyo

Country Japan

Citizenship Japanese

Mailing Address 3-23-2-702 Minami Karasuyama

City

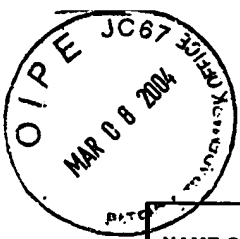
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State Tokyo

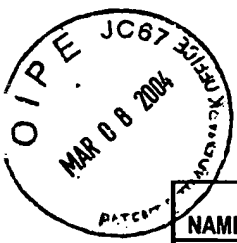
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Country Japan

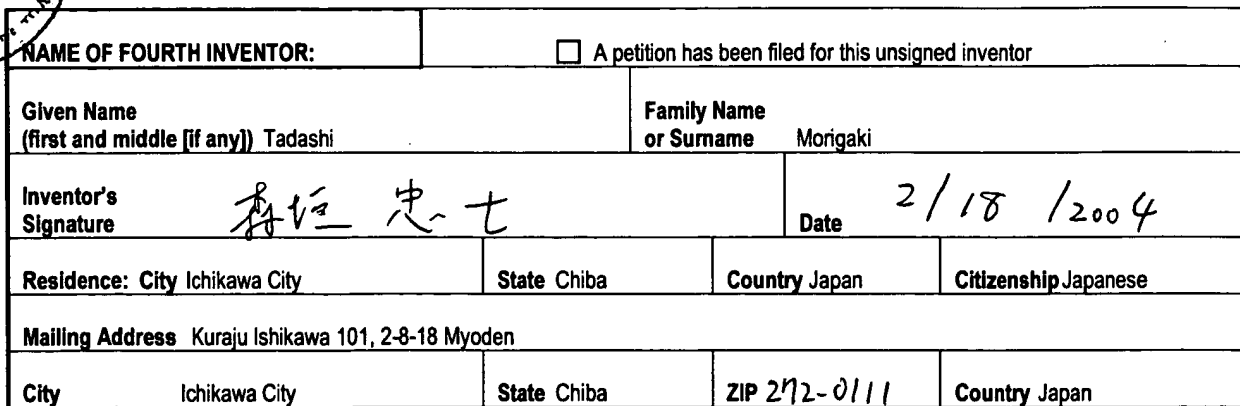
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

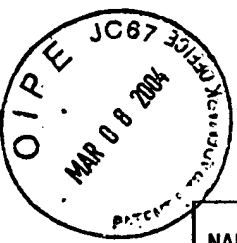


NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <i>Kei-ju Kōju</i>		Family Name or Surname <i>Nishi</i>	
Inventor's Signature <i>Nishi</i>		Date <i>Feb 20, 2004</i>	
Residence: City <i>Sakura-Shi</i>	State <i>Chiba</i>	Country <i>Japan</i>	Citizenship <i>Japanese</i>
Mailing Address <i>2-12-7 Ohsakidai</i>			
City <i>Sakura-Shi</i>	State <i>Chiba</i>	ZIP <i>285-0817</i>	Country <i>Japan</i>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			



NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Emi		Family Name or Surname Takehana	
Inventor's Signature <i>Emi Takehana</i>		Date <i>Feb, 18, 2004</i>	
Residence: City	Edogawa-Ku	State	Tokyo
		Country	Japan
Citizenship Japanese			
Mailing Address 1-38-1-602 Naka Kasai			
City	Edogawa-Ku	State	Tokyo
		ZIP	134-0083
		Country	Japan

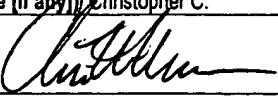


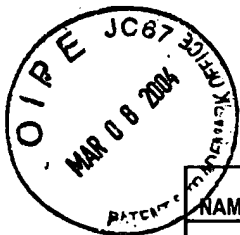


NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Randall B.		Family Name or Surname Pugh	
Inventor's Signature <i>Randall B. Pugh</i>		Date <i>2/26/2004</i>	
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 5273 Oxford Crest Drive			
City Jacksonville	State FL	ZIP 32258	Country US





NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Christopher C.		Family Name or Surname McMorrow	
Inventor's Signature 		Date 2/26/2004	
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 4333 Point La Vista Road South			
City Jacksonville	State FL	ZIP 32207	Country US



NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Evelyn R.		Family Name or Surname Aguilar	
Inventor's Signature <i>Evelyn R. Aguilar</i>		Date <i>2.26.04</i>	
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 13859 Weeping Willow Way			
City Jacksonville	State FL	ZIP 32224	Country



NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Janet J.		Family Name or Surname Plapp	
Inventor's Signature <i>Janet J. Plapp</i>		Date <i>2/26/2004</i>	
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 11557 Derby Forest Drive			
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